

SCC eFile	2011 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	211533015			
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: Technology Association of America</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: VIRGINIA PROFESSIONAL SERVICES, LLC 3850 Gaskins Rd., Suite 120 Richmond, VA 23233</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 12/31/2011</p> <p>SCC ID NO: 05308713</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	
CLASS	AUTHORIZED				
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 601 PENNSYLVANIA AVE., NW NORTH BUILDING, STE. 600</p> <p style="text-align: center;">CITY/ST/ZIP: WASHINGTON, DC 20004</p>					
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: Shawn Osborne TITLE: PRESIDENT ADDRESS: 601 Pennsylvania Ave. NW North Building, Suite 600 Washington, DC 20004 CITY/ST/ZIP/CO: </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: Shawn Osborne TITLE: PRESIDENT ADDRESS: 601 Pennsylvania Ave. NW North Building, Suite 600 Washington, DC 20004 CITY/ST/ZIP/CO:	<input checked="" type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR
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NAME: James Treleaven TITLE: TREASURER ADDRESS: 601 Pennsylvania Ave. NW North Building, Suite 600 Washington, DC 20004 CITY/ST/ZIP/CO:	<input checked="" type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR			
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NAME: Dennis Stolkey TITLE: VICE CHAIRMAN ADDRESS: 601 Pennsylvania Ave. NW North Building, Suite 600 Washington, DC 20004 CITY/ST/ZIP/CO:	<input type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR			

NAME:	Thomas Anderson	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Bruce Ballengee	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	William Ballhaus	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	David Belanger	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Robin Bienfait	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	William Blaylock	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Thomas Brandt	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Larry Brewer	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Gordon Coburn	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Tod Cohen	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		

NAME:	Chris Cook	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Steven Cooker	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Lynne Corddry	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Philippe Courtot	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Arthur Coviello	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Peter Craig	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Robert Cresanti	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Sue Dark	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Edward Davies	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Phil Friedman	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		

NAME:	Steven Gardner	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Linda Gooden	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Deirdre Hanford	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Ted Hengst	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Frederick Humphries	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	T. Kendall Hunt	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Kay Kapoor	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Jeff Katz	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington , DC 20004		
NAME:	Jon Korin	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Robert Laurence	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		

NAME:	Pam McCarthy	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Laurie McGraw	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Randy McMills	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Valerie Perlowitz	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Todd Rader	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	David Sanders	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	George Schindler	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Steven Sharp	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Thomas Shields	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		
NAME:	Raymond Spencer	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 Pennsylvania Ave. NW		
CITY/ST/ZIP/CO:	North Building, Suite 600 Washington, DC 20004		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Dan Squiller DIRECTOR 601 Pennsylvania Ave. NW North Building, Suite 600 Washington, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Henry Steininger DIRECTOR 601 Pennsylvania Ave. NW North Building, Suite 600 Washington, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Charlie Sundling DIRECTOR 601 Pennsylvania Ave. NW North Building, Suite 600 Washington, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ Benjamin J Aderson SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	Benjamin J Aderson, SECRETARY PRINTED NAME AND CORPORATE TITLE	4/24/2012 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			